SAMHSA-HRSA
CENTER for INTEGRATED HEALTH SOLUTIONS

Behavioral Health is Essential to Health

Substance Abuse and Mental Health Services Administration
SAMHSA
www.samhsa.gov   1-877-SAMHSA-7 (1-877-726-4727)

HRSA
Health Resources & Services Administration

integration.samhsa.gov

SAMHSA-HRSA Center
for Integrated Health Solutions
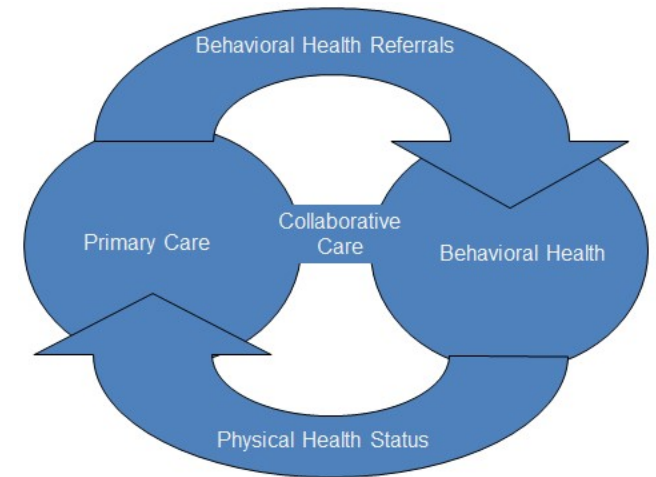
➢ Support integrated care as the national standard of practice

➢ Create and operate world-class technical assistance

➢ Ensure the success of SAMHSA & HRSA funded programs

➢ Disseminate practical tools, resources, and lessons learned

integration.samhsa.gov

Primary & Behavioral Health Integration:
The New Standard of Care
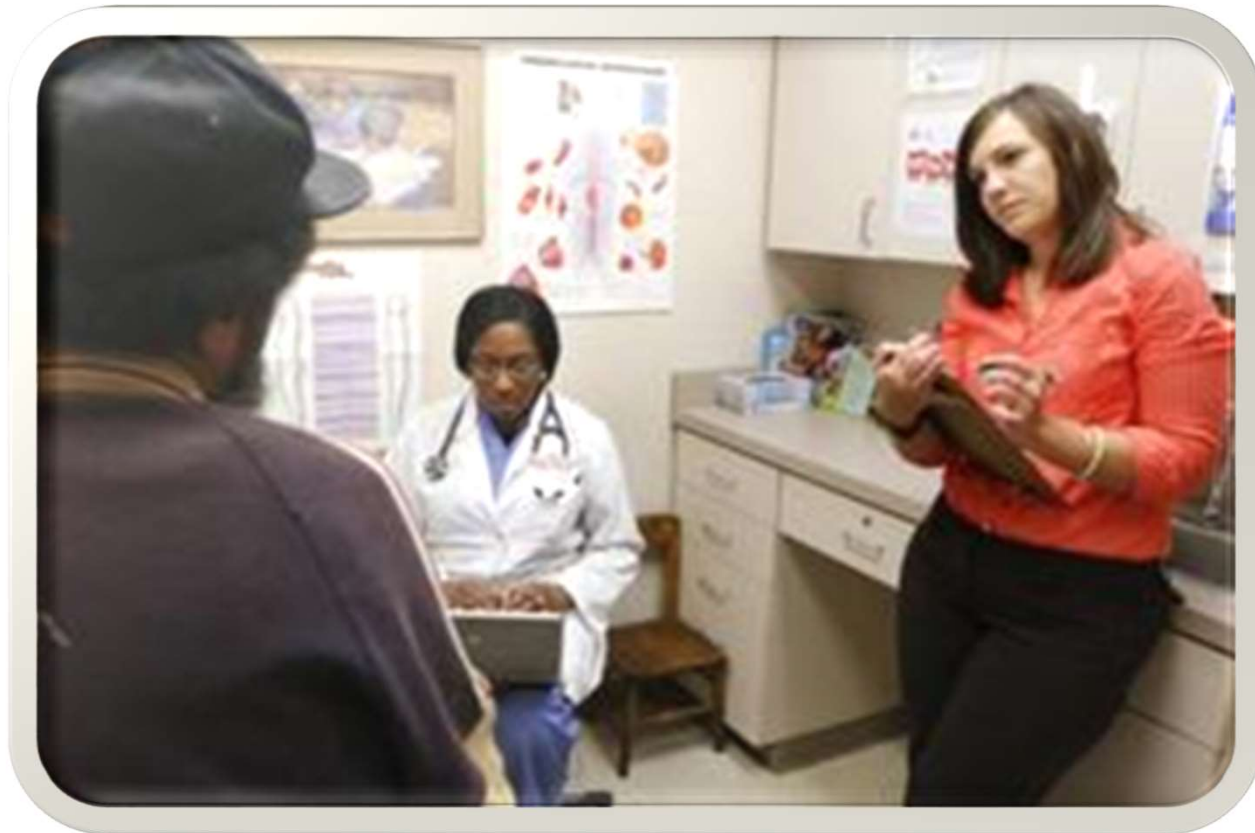
Behavioral Health is Integral to Patient-Centered Medical Homes

➢ High prevalence of behavioral health problems in primary care

➢ High burden of BH in primary care

➢ High cost of unmet BH needs

➢ Lower cost when BH needs are met

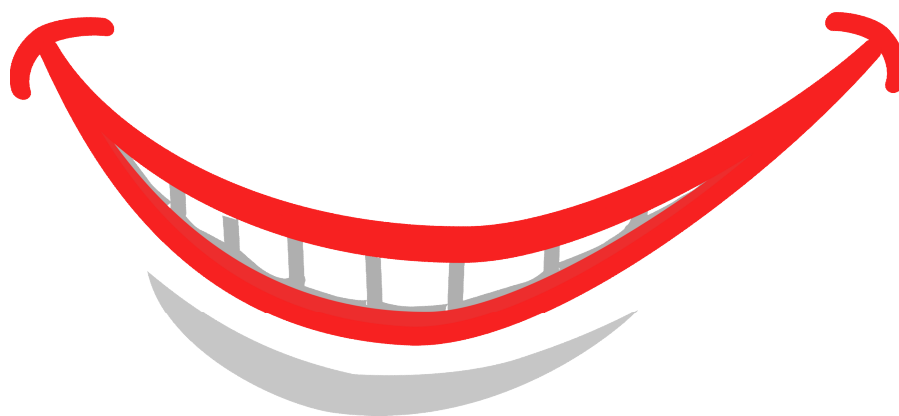➢ Better health outcomes

➢ Improved satisfaction

Behavioral Health is Integral to Dental Health

Dental Health and Psychiatric Disorders

Dental Health and Drug Use

Dental Health and Medication's Side Effects

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Defining Behavioral Health

Behavioral Health is an umbrella term for care that addresses any behavioral problems impacting health, **including mental health and substance abuse conditions**, stress-linked physical symptoms, patient activation and health behaviors. The job of all kinds of care settings, and done by clinicians and health coaches of various disciplines or training.

Source: Peek, C. J., National Integration Academy Council. (2013). Lexicon for Behavioral Health and Primary Care Integration: Concepts and Definitions Developed by Expert Consensus. In Agency for Healthcare Research and Quality (Ed.), *AHRQ Publication No.13-IP001-EF*.

Defining Integrated Care

The care a patient experiences as a result of a <u>team</u> of PC & BH clinicians, working together with patients and families, using a systematic and cost-effective approach to provide patient-centered care for a defined population.*
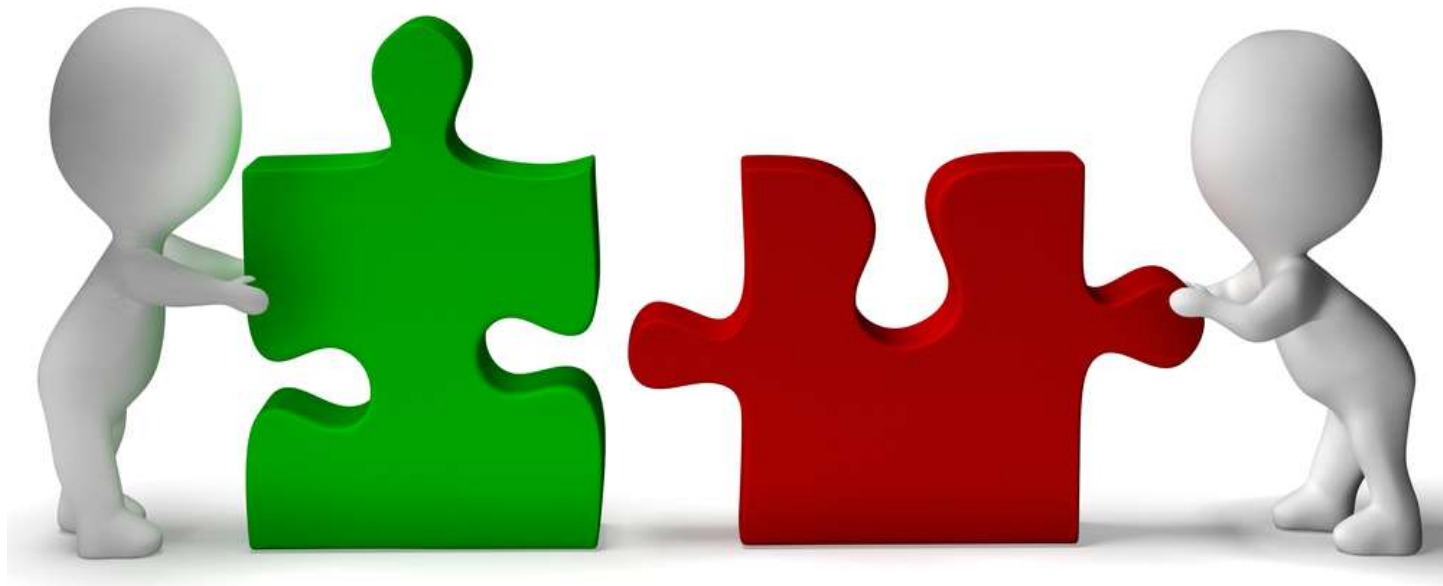
Lexicon for Behavioral Health and Primary Care Integration, AHRQ

Table 1. Six Levels of Collaboration/Integration (Core Descriptions)

COORDINATED KEY ELEMENT: COMMUNICATION		CO-LOCATED KEY ELEMENT: PHYSICAL PROXIMITY		INTEGRATED KEY ELEMENT: PRACTICE CHANGE	
LEVEL 1 Minimal Collaboration	LEVEL 2 Basic Collaboration at a Distance	LEVEL 3 Basic Collaboration Onsite	LEVEL 4 Close Collaboration Onsite with Some System Integration	LEVEL 5 Close Collaboration Approaching an Integrated Practice	LEVEL 6 Full Collaboration in a Transformed/ Merged Integrated Practice
Behavioral health, primary care and other healthcare providers work:					
In separate facilities, where they:	In separate facilities, where they:	In same facility not necessarily same offices, where they:	In same space within the same facility, where they:	In same space within the same facility (some shared space), where they:	In same space within the same facility, sharing all practice space, where they:
▸ Have separate systems ▸ Communicate about cases only rarely and under compelling circumstances ▸ Communicate, driven by provider need ▸ May never meet in person ▸ Have limited understanding of each other's roles	▸ Have separate systems ▸ Communicate periodically about shared patients ▸ Communicate, driven by specific patient issues ▸ May meet as part of larger community ▸ Appreciate each other's roles as resources	▸ Have separate systems ▸ Communicate regularly about shared patients, by phone or e-mail ▸ Collaborate, driven by need for each other's services and more reliable referral ▸ Meet occasionally to discuss cases due to close proximity ▸ Feel part of a larger yet ill-defined team	▸ Share some systems, like scheduling or medical records ▸ Communicate in person as needed ▸ Collaborate, driven by need for consultation and coordinated plans for difficult patients ▸ Have regular face-to-face interactions about some patients ▸ Have a basic understanding of roles and culture	▸ Actively seek system solutions together or develop work-a-rounds ▸ Communicate frequently in person ▸ Collaborate, driven by desire to be a member of the care team ▸ Have regular team meetings to discuss overall patient care and specific patient issues ▸ Have an in-depth understanding of roles and culture	▸ Have resolved most or all system issues, functioning as one integrated system ▸ Communicate consistently at the system, team and individual levels ▸ Collaborate, driven by shared concept of team care ▸ Have formal and informal meetings to support integrated model of care ▸ Have roles and cultures that blur or blend

Understanding What Behavioral Health Integration look like in Primary Care

➤ Universal MH/SU Screening

➤ Clinical teams with embedded behavioral health clinicians

➤ Evidence-based Treatments

  ➤ Psychotherapy

  ➤ Prescribing with Psychiatric consultation

➤ Medication assisted treatment for substance use disorders

➤ Treatment plans that include mental health/recovery goals

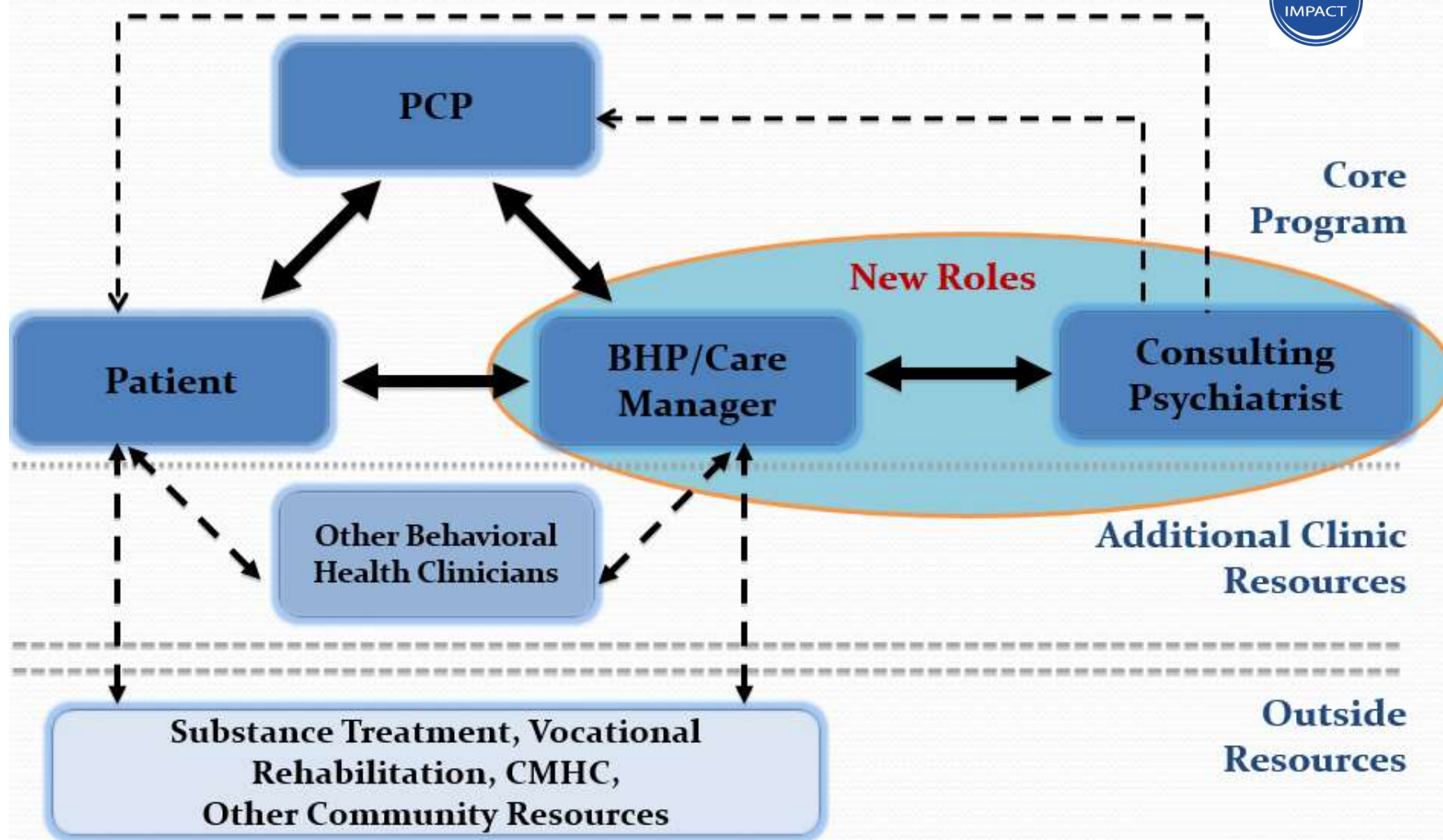➤ Quality Improvement Measures

➤ Community Linkages

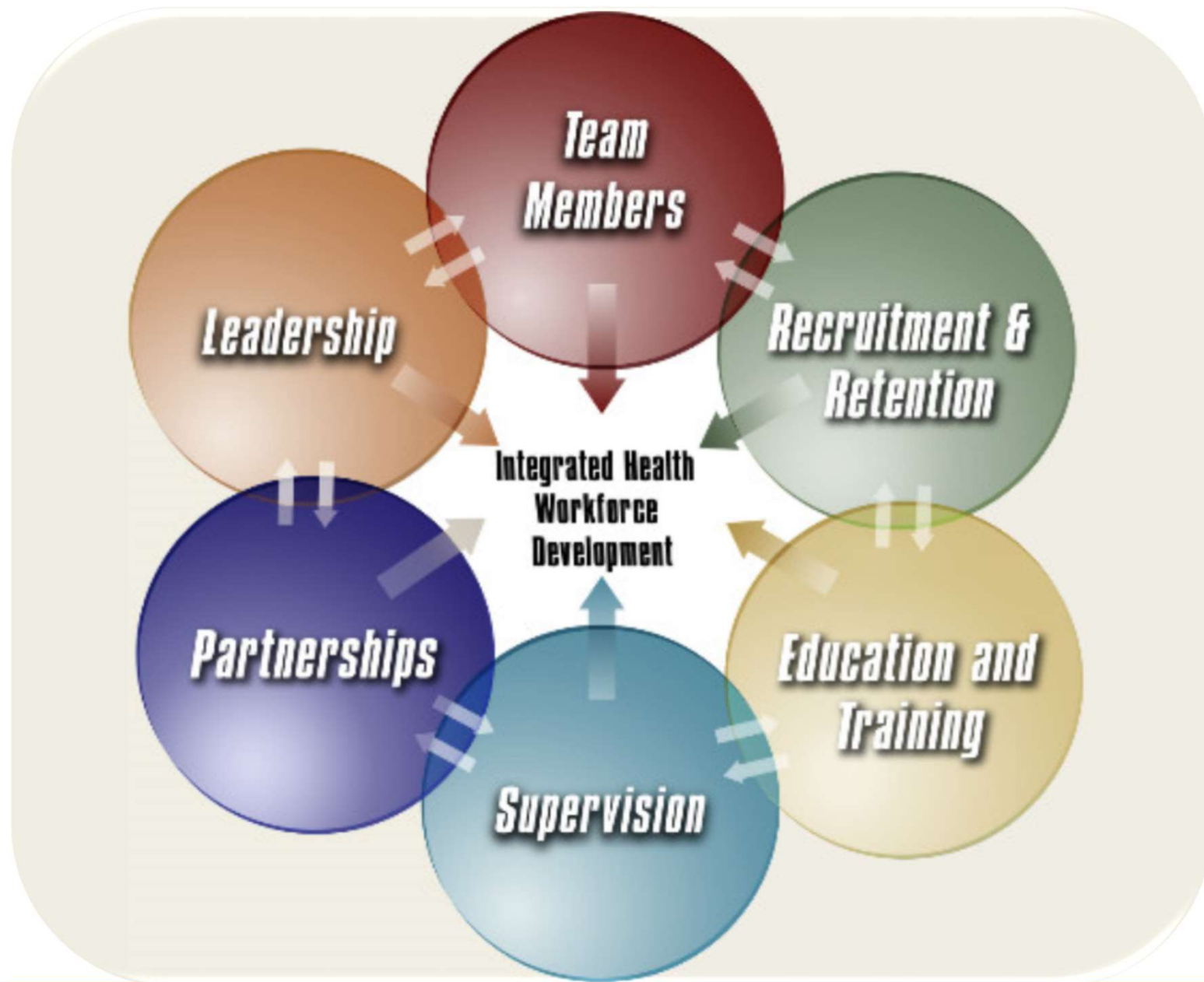# LEVELS OF COMPLEXITY OF PATIENT'S MENTAL HEALTH NEEDS:

PREVENTIVE SERVICES & SCREENING: Applicable to all patients being seen in a primary care practice, to prevent and detect mental health problems.

EARLY INTERVENTION & ROUTINE CARE PROVISION: Applicable for patients and families with identified but relatively uncomplicated, high prevalence behavioral health clinical problems. Assessment and management is typically performed by the PCP team including a behavioral health clinical with support available from a consulting psychiatrist.

SPECIALTY CONSULTATION, TREATMENT & COORDINATION: Applicable for patients with defined behavioral health disorder/problem at intermediate level of risk, complexity or severity, requiring enhanced specialist consultation or intervention. Involves a negotiated management role between PCPs and mental health and addiction providers.

INTENSIVE MENTAL HEALTH SERVICES FOR COMPLEX CLINICAL PROBLEMS: Applicable for patients with a defined behavioral health disorder/problem at high level of risk, complexity or severity, requiring specialist consultation or intervention that may include multisystem service teams.

IMPACT

PCP

Core Program

New Roles

Patient — BHP/Care Manager — Consulting Psychiatrist

Other Behavioral Health Clinicians

Additional Clinic Resources

Substance Treatment, Vocational Rehabilitation, CMHC, Other Community Resources
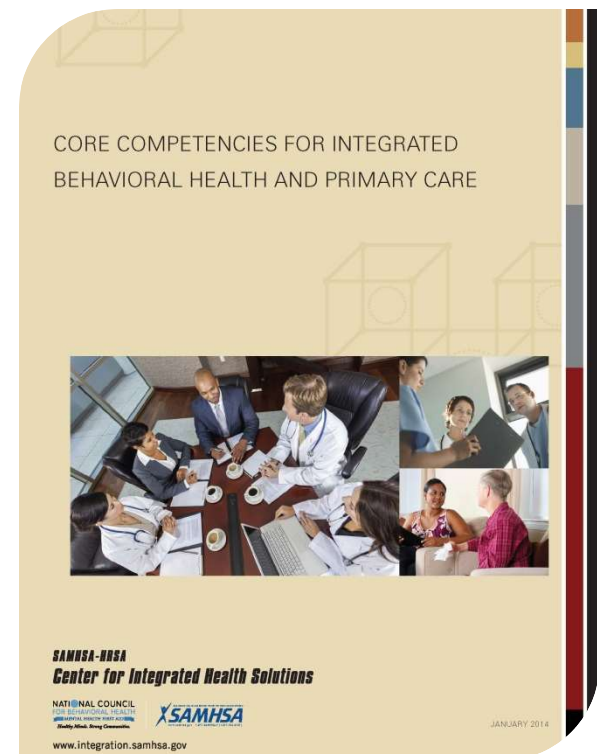
Outside Resources

Core Competencies for Integrated Behavioral Health and Primary Care

A resource for primary and behavioral health care organizations as they shape job descriptions, orientation programs, supervision, and performance reviews for workers delivering integrated care.

- ✓ Interpersonal Communication
- ✓ Collaboration & Teamwork
- ✓ Screening & Assessment
- ✓ Care Planning & Care Coordination
- ✓ Intervention
- ✓ Cultural Competence & Adaptation
- ✓ Systems Oriented Practice
- ✓ Practice- Based Learning & Quality Improvement
- ✓ Informatics

CORE COMPETENCIES FOR INTEGRATED BEHAVIORAL HEALTH AND PRIMARY CARE

SAMHSA-HRSA
Center for Integrated Health Solutions

NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH
Healthy Minds. Strong Communities.

✗SAMHSA

www.integration.samhsa.gov

JANUARY 2014

Preparing and Developing Your Workforce to Deliver Integrated Care

Use Core Competencies to:

➢ Shape Workforce Training

➢ Inform Job Descriptions

➢ Educate candidates during your recruitment process

➢ Inform your new employee orientation

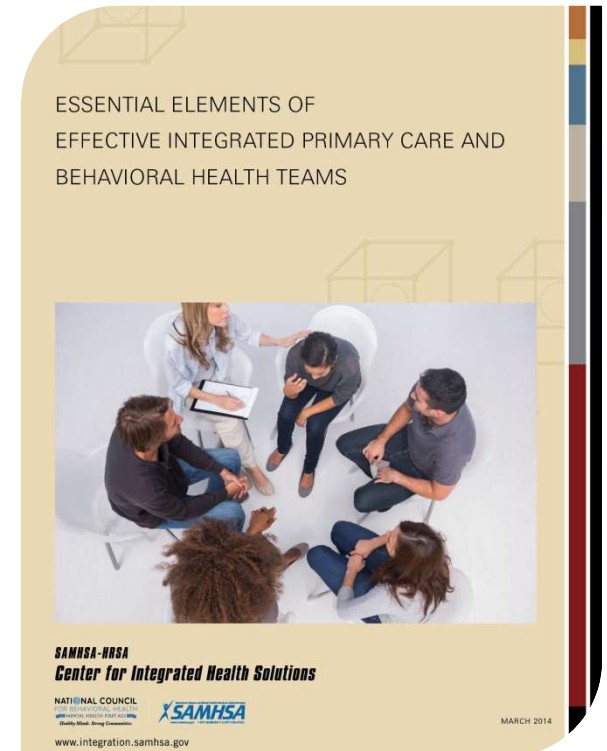➢ Incorporate competencies into employee performance assessments

Lathan Medical Group – Times Union Blog

Essential Elements of Effective Integrated Primary & Behavioral Healthcare Teams

Based on interviews with integrated teams within primary care settings, <u>this resource</u> *explores four essential elements for effective integrated behavioral health and primary care teams and provides a roadmap for organizations designing their own teams, using examples from these best practices.*

✓ Leadership & Organizational Commitment
✓ Team Development
✓ Team Process
✓ Team Outcome

ESSENTIAL ELEMENTS OF
EFFECTIVE INTEGRATED PRIMARY CARE AND
BEHAVIORAL HEALTH TEAMS

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MARCH 2014

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Essential Elements for Integrated Behavioral Health & Primary Care Teams

1. Leadership & Organizational Commitment

➢ Leaders that are willing to allocate resources to the developmental process, including the time needed for cultural shifts, changes to practice, and team process
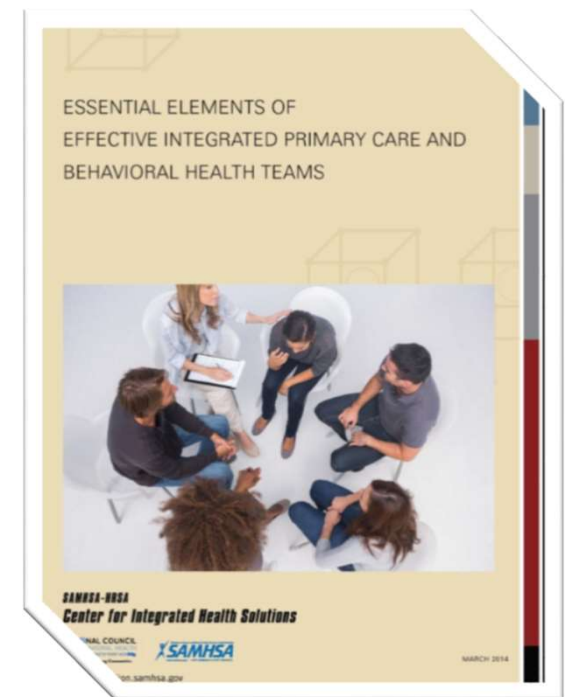
2. Team Development

➢ Providers are given clear expectations regarding team-based care, roles, and responsibilities

3. Team Process

➢ The team continuously reexamines team functioning and dynamics as the team grows

4. Team Outcomes

➢ Integrated teams track and monitor patients' treatment through objective measures

ESSENTIAL ELEMENTS OF
EFFECTIVE INTEGRATED PRIMARY CARE AND
BEHAVIORAL HEALTH TEAMS

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MARCH 2014

NCQA Standard 2: Team-Based Care

2B: Medical Home Responsibilities: Inform patients about…

- Care teams include BH providers
- Integrated care plans
- Access to BH appointments
- Self management support for behavioral change

2C: Culturally and Linguistically Appropriate Services

- Assess diversity of patient population
- Track care for underserved individuals:
  - Severe and persistent mental illness
  - Substance use disorders

2D: The Practice Team

- BH provider - an integral member of care team
- Team *trained* to manage care of vulnerable populations:
  - Engage patients in care and behavioral change
  - Person-centered, integrated care plans

Advancing BH Integration within NCQA Recognized Patient-Centered Medical Homes

Behavioral Health Consultation

➢ Behavioral Health Consultants (BHCs) work alongside primary care providers (PCP) and make recommendations to the PCP.

➢ Immediately accessible for both curbside and in-exam room consults, same-day visits (15 – 30 minute consultation), prevention education/anticipatory guidance.

➢ Shared records: Chart in the medical record using a SOAP note format.

➢ No office, No Caseload, No "no shows"

Robinson, P.J. and Reiter, J.T. (2007). Behavioral Consultation and Primary Care (pp 1-16). N.Y.: Springer Science + Business Media.

Education & Training

Integrated Health Workforce Training

Producing and implementing integrated health education curriculum and resources for:

- **Psychiatrists** Working in Primary Care
- **Consumers** serving as Peer Educators
- **Case Managers** as Health Navigators
- **Addiction Professionals** Working in Primary Care
- **Primary Care Clinicians** Working in Behavioral Health Settings
- **Care Management** in Primary Care for current Behavioral Health Workforce
- **Mental Health First Aiders** in Rural Communities
- **Social Worker** Standard of Practice and Field Placement

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Psychiatrists

Psychiatric Consulting in Primary Care:

A 6 module curriculum is designed to increase psychiatrists' capacity to practice and/or consult in integrated health settings.

- Module 1: Introduction to Primary Care Consultation Psychiatry
- Module 2: Building a Collaborative Care Team
- Module 3: Psychiatrist Consulting in Primary Care
- Module 4: Behavioral Health in Primary Care
- Module 5: Medical Patients with Psychiatric Illness
- Module 6: The role of the Psychiatrist in the Public Mental Health System

AIMS CENTER | Advancing Integrated Mental Health Solutions

Mental Health in Primary Care

Home
Overview
Implementation Tools
Programs & Projects
Research & Evaluation
Training / Clinician Resources
  Primary Care Physicians
  Care Managers
  Psychiatric Consultants
  Webinars
  In-person
Implementation Support
Clinical Consultation
About Us
Contact Us

Consulting Psychiatrist Training Home

Training Consulting Psychiatrists

After reviewing the following materials a psychiatrist should be able to:

1. Make the case for integrated behavioral health services in primary care, including the evidence for collaborative care
2. Discuss principles of integrated behavioral health care
3. Describe the roles for a primary care consulting psychiatrist in an integrated care team
4. Apply a primary care oriented approach to psychiatric consultation for common behavioral

Tools
Getting Started
  Worksheet
Job Descriptions
  Care Manager
  Consulting Psychiatrist
  Introduce the Care Team Flyer
Team Building
  Worksheets
Medications
  Brief Medication Prescribing

Addiction Professionals

Primary Care for SU Professionals 5-hour Online Course:

A 5-hour self-paced online course for addiction treatment professionals considering career opportunities in primary care in order to provide professionals with resources and information to help them decide whether working in a primary care setting is right for them.

Social Workers

Integrated Healthcare Curriculum for Schools of Social Works:

➢ A competency-based curriculum and curriculum modules to prepare Masters of Social Work students for behavioral health practice focused on integrative and collaborative primary/behavioral health care.

➢ Will prepare future MSWs to enter the workforce with the needed competencies to provide and lead integrated healthcare. Curriculum offerings will be paired with field placement opportunities committed to integration and collaboration.

CSWE

COUNCIL ON SOCIAL WORK EDUCATION

Strengthening the Profession of Social Work
LEADERSHIP IN RESEARCH, CAREER ADVANCEMENT, AND EDUCATION

Educators   International   Students

Care Management in Primary Care

Care management is central to the success of the Patient Centered Medical Home (PCMH) and to be successful, care managers working in primary care settings need to develop general skills at

- engaging patients
- promoting their activation to improve their own health
- general medical and behavioral health skills to be able to connect them to appropriate services
- Capacity to address questions, to teach healthy living, and support treatment plans.

University of Massachusetts Medical School
UMASS

The Center for Integrated Primary Care

Primary Care Providers

The <u>Primary Care Provider Curriculum</u> is intended for primary care clinicians working in public mental health settings, which is a growing trend across the country, to deal with the concerns with the health disparity experienced by patients with serious mental illnesses.

Module 1: Introduction to Primary and Behavioral Heath Integration
Module 2: Overview of the Behavioral Health Environment
Module 3: Approach to the Physical Exam and Health Behavior Change
Module 4: Psychopharmacology and Working with Psychiatric Providers
Module 5: Roles for PCPs in the Behavioral Health Environment

Communities

Mental Health First Aid (MHFA) Training

- Creating capacity within the public to identify, understand, and respond to signs of mental illnesses and substance use disorders.

- MHFA introduces participants to risk factors and warning signs of mental health problems and substance use disorders, builds understanding of their impact, and overviews common treatments. CIHS is focusing its MHFA efforts on:
  - Rural Communities
  - Primary Care
  - Spanish Adaptation

USA MENTAL HEALTH FIRST AID
www.MentalHealthFirstAid.org

Behavioral Health Integration is Consistent with Principles of Recovery

Recovery is a process of change through which individuals improve their health and wellness, live a self-directed life, and strive to reach their full potential

Health : Overcoming or managing one's disease(s) or symptoms, making informed healthily choices that support physical and emotional wellbeing.

Home: a stable and safe place to live

Purpose: meaningful daily activities, such as a job, school, volunteerism, and the independence, income and resources to participate in society

Community: relationships and social networks that provide support, friendship, love and hope

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